

KEY QUESTIONS

POST-DISPATCH INSTRUCTIONS



1. **(Appropriate ≥ 1)** Is there a **defibrillator** (AED) available?
2. **(Suspected death)** Tell me please, **why** does it look like s/he's **dead**?

a. **(DBVIDUS DEATH)** Do you think s/he is **beyond** any **help** (resuscitation/CPR)? ★

Uncertain ————— 9-D2

b. **(EXPECTED DEATH)** Are you **certain** we should **not** try to **resuscitate** her/him? ★

Uncertain ————— 9-D2

- a. **(Suspected Workable Arrest)** I'm sending the **paramedics** (ambulance) to help you now.
Stay on the line and I'll tell you **exactly** what to do next.
- b. **(DBVIDUS or EXPECTED DEATH)** I'm sending someone to **assist** you. Is there **anything else** we can do?

* **(OBVIOUS or EXPECTED DEATH)** Notify proper authorities.

DLS * Link to ☎ ABC-1 unless: ➡

Danger or Contamination ————— ▼ X-7

Suspected Workable Arrest ————— ⚡ ABC-1

AED available (age ≥ 1) ————— ⚡ Z-1

Choked first (Unconscious) ————— ⚡ ABC-1

LEVELS	#	DETERMINANT DESCRIPTORS	➡ SEE ADDITIONAL INFO	CODES	RESPONSES	MODES
E		Suspected Workable Arrest (NDT BREATHING/INEFFECTIVE BREATHING):				
	1	Not breathing at all		9-E-1		
	2	Breathing uncertain (AGONAL)		9-E-2		
	3	Hanging		9-E-3		
	4	Strangulation		9-E-4		
	5	Suffocation	* (to be selected from Case Entry only)	9-E-5		
	6	Underwater		9-E-6		
D	1	INEFFECTIVE BREATHING (discovered during Key Questioning only) * (select only when linking from other Chief Complaint Protocols)		9-D-1		
	2	DBVIDUS or EXPECTED DEATH questionable		9-D-2		
B	1	DBVIDUS DEATH unquestionable (a through i)		9-B-1		
Ω	1	EXPECTED DEATH unquestionable (x through z)		9-Ω-1		

NOT LICENSED FOR USE IN ANY
ON-LINE CALLTAKING POSITION

OBVIOUS DEATH

Local Medical Control must define and authorize (X) any of the patient conditions below before this determinant can be used. Situations should be unquestionable and may include:

- ☐ a – Cold and stiff in a warm environment
- ☐ b – Decapitation
- ☐ c – Decomposition
- ☐ d – Incineration
- ☐ e – **NON-RECENT** death
- ☐ f – Severe injuries obviously incompatible with life
- ☐ g – Submersion (> 6hrs)
- ☐ h – _____
- ☐ i – _____

Approval signature of local Medical Control

Date approved

EXPECTED DEATH

Local Medical Control must define and authorize (X) any of the patient conditions below before this determinant can be used. Situations should be unquestionable and may include:

- ☐ x – Terminal illness
- ☐ y – **ONR (Do Not Resuscitate) Order**
- ☐ z – _____

Approval signature of local Medical Control

Date approved

NON-RECENT

Six hours or more have passed since the incident or injury occurred.

INEFFECTIVE BREATHING

The following, when **volunteered** at any point during Case Entry (code as **ECHO** on 2, 6, 9, 11, 15, 31):

- "Barely breathing"
- "Can't breathe at all"
- "Fighting for air"
- "Gasping for air" (**AGONAL BREATHING**)
- "Just a little" (**AGONAL BREATHING**)
- "Making funny noises" (**AGONAL BREATHING**)
- "Not breathing"
- "Turning blue or purple"

? Determining AGONAL BREATHING

When the patient is **unconscious or not alert** and is **breathing abnormally or irregularly**, the EMD should **tell the caller** to state when the patient **takes each breath**. If the **time between breaths is 10 seconds or more**, this should immediately be considered **INEFFECTIVE BREATHING** that is likely a fading, **AGONAL** (dying) respiratory pattern. Check a maximum of **four breaths** (three intervals tested).

(Read verbatim) Okay, I want you to **tell me** every time s/he **takes a breath**, starting now.

- ≥ 10 sec. interval = **AGONAL**

Rules

1. Often, when faced with a dying **ONR** patient, **callers just want reassurance that they are doing the right thing**. However, if the caller believes the **ONR** should be ignored or is uncertain if the

ONR is valid or in place, an appropriate response and resuscitation attempt should be made.

2. A healthy child (or young adult) found in cardiac arrest is considered to have a **foreign body airway obstruction until proven otherwise**.
3. An unconscious person in whom breathing cannot be verified by a 2nd party caller (with the patient) is considered to be **in cardiac arrest until proven otherwise**.
4. When the initial **Chief Complaint** appears to be **seizure**, go to **Protocol 12** regardless of consciousness and breathing status.

Axioms

1. "Funny noises" reported by the caller generally means the patient is unconscious with an uncontrolled airway and often represents **AGONAL** (dying) respirations at the **beginning of a cardiac arrest**.
2. **AGONAL** respirations can be confused with "still breathing" before they fade away during an arrest.
3. Automated external defibrillators (AED) might also be called "shock boxes." Other local names may be used.

ONR (Do Not Resuscitate) Order

A physician's order directing medical personnel to not attempt to revive a patient using CPR or other extraordinary means.